



4. The consumer is not required to purchase a casket for the purpose of cremation, However, the crematory authority shall not accept human remains for cremation which are not in a closed cremation container. The crematory authority may reject a cremation container which shows evidence of leakage. The cremation container shall be cremated with the human remains. \_\_\_\_\_AA
5. The consumer may choose cremation without choosing embalming services. However, if the crematory authority does not have a refrigerated holding facility it cannot accept human remains for anything other than immediate cremation. \_\_\_\_\_AA
6. A body shall not be cremated with a pacemaker or other hazardous implant, including any toxic or explosive type sealed implants in place. The next class of authorizing agent is responsible for disclosing the existence of any pacemaker or other hazardous implants to the crematory authority. \_\_\_\_\_AA
7. All body prosthesis, bridgework or similar items removed from the cremated remains shall be disposed of by the crematory authority unless authority to do otherwise is specifically granted in writing. \_\_\_\_\_AA
8. Cremated remains shall not be contaminated with foreign material unless specific authorization has been received. \_\_\_\_\_AA
9. The crematory authority shall not conduct any cremations nor accept a body for cremation unless it has a cremation authorization form signed by the authorizing agent clearly stating the disposition. Disposition shall be by:

- \_\_\_\_\_ Interment
- \_\_\_\_\_ Scattering in a scattering area or garden
- \_\_\_\_\_ Scattering on private property with the permission of the owner
- \_\_\_\_\_ Delivery either in person or by registered mail to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_AA

10. It is unlawful to cremate the remains of more than one individual within the same cremation chamber. \_\_\_\_\_AA

Signed: _____	Witnesseth: Signed: _____
Address: _____	Print Name: _____
City, State, Zip: _____	Address: _____
Telephone: _____	City, State, Zip: _____
	Telephone: _____

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